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Federation for the Abolition of the State...

Memorandum issued by the British Committee...

[Westminster]

[1897]

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[NOTE.—The following memorandum was drawn up before the issue of the Despatch of the Secretary of State for India regarding measures to be adopted for checking the spread of venereal disease among the British troops in India. The Committee of the Federation have, however, nothing to alter in this memorandum in consequence of that Despatch. The Despatch is criticised in a Memorial to Lord George Hamilton issued by the committee.]

MEMORANDUM

ISSUED BY THE

British Committee of the Federation for the Abolition of the State Regulation of Vice.

In the autumn of last year the Government appointed a Departmental Committee to enquire into the prevalence of venereal diseases among the British troops in India. The Report of this Committee, which has recently been issued, brings to the front again a very serious and difficult question. The number of admissions to hospital for venereal diseases which increased greatly in India during the last 15 years of the operation of the Contagious Diseases Acts and Cantonment Regulations still continues to increase since the repeal of these measures in that country, **though since the Repeal of the C.D. Acts in England there has been a remarkable decrease of admissions to hospital in the Home Army.***

A return to the old system of Regulation is admittedly impossible, not only because of the encouragement it gave to vice, but also because of its acknowledged failure. The Army in India is still reaping the fruits of the sanction and currency given by so many years of State "protection" to the assumption that vice is necessary to the unmarried soldier—an assumption which is the concluding word of the Departmental Committee on the subject.

While we are unalterably opposed to the reimposition of any system containing the essential principles of the Contagious Diseases Acts, it is desirable at once to say that we do not believe in a do-nothing policy. From the first we have known and said that the abolition of the system of Regulation was but a clearing of the ground, and our hope was that, when the ground should be so cleared, the Army authorities might be led to seek and to find a better way. We fear, however, that the subject has had no sufficient attention.

The things that can be done all come under one great head. **An honest attempt must be made to diminish the vice which is the cause of the disease.** To do anything else while neglecting this will be vain.

We demand, therefore that there should be no reversion to an immoral and discredited system, but that practical steps should be taken which, while supplying adequate means for the voluntary treatment of disease, should be based on—

(1.) A positive discouragement of sexual vice;

(2.) And a positive recognition of the merits of abstinence from vice.

In relation to this we would remark:

(*a.*) As matters stand it seems that even the most habitual profligacy is no impediment to promotion. It is understood that Commanding officers make confidential reports on their subordinates, but that the question of sexual morality is never mentioned. Should it not be ordered that henceforth moral character shall be at least an important element in promotion?

(*b.*) A man who has spent much of his time in hospital from these disgraceful diseases may, if he be a well conducted soldier in other respects when he is out of hospital, get his discharge with a character described as "exemplary." Should not the War Office decide at once, as it can if it

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* The following figures giving the number of admissions into hospital per 1,000 of strength for the diseases in question, are taken from the table given at page 19 of the Departmental Committee's Report:—

In India. Year.	Number.		In England. Year.	Number.	
1872	191	System in full operation.	1870	201	First three years of the operation of the Contagious Diseases Acts in England.
1877	224		1871	201	
1882	265		1872	202	
1887	361				
1888	372	Year of Repeal resolution.	1880	245	Last three years of their operation immediately preceding Abolition in England.
1889	481		1881	245	
1890	503		1882	246	
1891	400	System in partial operation (*see below*).			
1892	409		1893	194	Latest three years of published statistics.
1893	466		1894	182	
1894	511		1895	173	
1895	522				

In 1888 the House of Commons passed a Resolution condemning the Regulation system in India, and in consequence of it various Orders were issued in that country, but it was proved before Mr. George Russell's Committee of 1893 that Resolution and Orders alike were more or less disregarded and that the system continued more or less in operation, with some slight modifications in some cases. It is not definitely known what Regulations have been followed in the Cantonments since that date.

The figures for the series of years quoted above give the admissions into hospital, including slight as well as severe affections, and also including re-admissions of the same individual. They have lately been frequently quoted as if they represented the extent of the disablement of the army. This of course is a mistake. Parliamentary paper No. 153 of 1896 shows that the reduction of strength by these diseases, *i.e.*, the number "constantly in hospital" in the year 1894 (the latest given), was 43 per 1,000 in India, and 16 per 1,000 in the Home army. It is worth remarking that the statistics given in the Departmental Committee's Report have already been laid year by year before the public by this Association. See especially the pamphlet entitled "Has Regulation proved to be a Sanitary Benefit?" published by Dr. Nevins in September last.

It is further to be observed that in a Memorandum dated 25th January, 1894, the Army Sanitary Commission, which has since uttered a somewhat uncertain sound, commenting on the figures before it at that date, said:—

"The facts, so far as we can ascertain them, lead us to the conclusion that a compulsory lock hospital system in "India had proved a failure, and that its re-institution cannot consequently be advocated on sanitary grounds. In stating "this conclusion we may add that we are merely repeating the opinions which the Army Sanitary Commission have "uniformly held, that venereal diseases in the army of India could not be repressed by such restrictive measures, and in "support of this statement we may refer to the Memoranda on the Indian Sanitary Reports which have issued from this "office for many years. We believe that the best practicable means of diminishing the prevalence of these diseases is to be found in establishing a system of voluntary lock hospitals, and in providing the soldier, as far as possible, with healthy occupation and recreation."

please, that the "medical history sheet" shall be taken into consideration as well as the "defaulters' sheet" in giving the soldier a character?

(*c*.) Why should not the bad condition of a regiment in regard to this question be regarded by the authorities as a reflection on the officers and regiment, involving special discipline?

(3.) Before any step is taken to depart from the attitude which has for so many years been adopted by responsible authorities in this country we suggest that a Select Committee should be appointed to enquire into the following points and others that may be suggested—

(*a*) What can be done more than has already been done, and more than is suggested above, to raise the moral tone of the Army both among officers and men?

(*b*) What more can be done in the way of providing occupation, recreation, &c., as suggested by the Army Sanitary Commission?

(*c*) Under what circumstances the proportion of married men, which under the East India Company was 20 or 30 per cent., was reduced to 12 per cent. and is now less than 4 per cent.

(*d*) Whether a system ensuring older men and longer service for the British Army in India, so as to increase the proportion of mature men, as suggested by Lord Roberts, is feasible or desirable?

(*e*) Why and to what extent the 70 "Cantonment" and "Cantonment General" Hospitals at one time in existence succeeded or failed, and why there are now only 13 of these hospitals and 13 outdoor dispensaries now in existence for the 108 military stations in India, and whether any means could be taken to make hospitals of this class more useful?

(*f*) Whether any disciplinary measures have been or can advantageously be adopted to diminish the temptations to vice, by placing certain localities out of bounds, and in other ways?

(*g*) Whether any steps are being taken or can advantageously be taken to prevent the access of women to the neighbourhood of barracks, cantonments, or camps without legitimate business?

(*h*) Whether the present system of hospital stoppages, which are now the same for shameful diseases as for those which are unavoidable, is the best possible?

(*i*) What are the causes of the great variations in the admissions to hospitals in different stations and in different regiments?

A suggestion has been made in various quarters that something might be done on the lines of the Act for the Notification of Diseases, and by getting powers for the imprisonment of persons in hospitals, but using the milder term "detention," in preference to the plainer word "imprisonment." There may be some plausibility in this suggestion. But it may be pointed out that while no stigma attaches to the Notification of Scarlet Fever and similar diseases, it is certain that it would be almost impossible to induce men to denounce themselves, to induce women to denounce their husbands, and to induce medical men to denounce their patients, as the victims of the shameful diseases in question. Certain classes of persons would be denounced. Respectable girls would be falsely reported, anonymously, by profligate men, who would hope thus to get them more easily into their power. Prostitutes would be denounced by men who alleged that they had communicated disease; and experience in all parts of the world shows that such allegations are constantly made against women in whom no trace of disease can be discovered. Lord Roberts told the Departmental Committee in 1893 that "soldiers seldom or never point out the woman who may have diseased them." The evidence in one of the Hong Kong Reports shows that they very frequently denounce women in whom no signs of disease can be detected. Women of the worst character would denounce or blackmail men, sometimes innocent men. Quack-doctors of the worst character would drive a thriving trade under promise of secrecy, and blackmail under threat of denunciation. Obviously, also, Notification is absolutely nugatory without the power of compulsory examination, imprisonment, and compulsory treatment. But compulsory examination is admittedly the essential part, the "keystone" of the Regulation system. Notification and detention, therefore, lead straight back to the old exploded system.

The proposal now put forward to return to the Regulation of prostitution, in some shape or form, in India is open to all the objections which as a matter of principle were urged against the old system of Regulation, and these objections would not be met by any variation of details. They are inherent in the system under every form. Nor would the adoption of what we conceive to be salutary measures absolve us from the necessity of conducting an active campaign against any system involving the principles which we condemn should an endeavour be made to revert to them.

We object to any periodical or compulsory examination of women, and any examination whether voluntary or not, the object of which is to ascertain whether a woman is or is not fit for prostitution, or which has relation to her intended or expected prospective prostitution; as well as all arrangements, acts, or practices which amount to or tend towards the licensing or Regulation of prostitution.

We therefore assert again, that the proper way to obtain a permanent diminution in the amount of disease is to aim at a reduction in the amount of vice. We believe in the unity of moral and hygienic law. We are satisfied that every step taken in this matter must operate either to diminish or to increase vice, and that every such system as the Indian Cantonment Regulations inevitably increases it. We are therefore prepared to offer to the re-imposition of that system in any shape or form the most strenuous and uncompromising resistance; and we appeal to the good sense and patriotism, as well as the moral and religious feeling of the country, to aid us in keeping up this resistance till better methods have taken the place of those which have already been discarded in the past as being at once demoralising and ineffectual.

All who agree with our views and attitude, and who would like from time to time to receive further communications, are respectfully requested to communicate with the Secretary of the British Committee at the address given below.

Signed on behalf of the Committee,

WALTER S. B. McLAREN,
Chairman.

30th March, 1897.

OFFICE OF THE BRITISH COMMITTEE,
17, TOTHILL STREET, WESTMINSTER.

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